

ing the discourse of Dr. Sims, was reminded that he had read somewhere the report of a successful case operated upon in which the silver suture was used. He instituted a correspondence on the subject, and finally found that it was reported in a London journal in the year 1835. Dr. Simpson is a very ingenious man, and ready to adopt any improvement that gives promise of value, but this case passed him unnoticed, and would, in all probability, never have been thought of again if he had not read the discourse of Dr. Sims. The remarks of Sidney Smith, in the defence of Hamilton, who established a system of education, when the critics denied the originality of the system, are very appropriate. He says: "Whether Hamilton is or is not the inventor of the system that bears his name, or what his claims to originality may be, are questions of very secondary importance; but they merit a few observations. That man is not the first discoverer of any art who first says the thing; but he who says it so long, so loud, and so clearly that he compels mankind to hear him. The man who is so deeply impressed with the importance of the discovery that he will take no denial, but, at the risk of fortune or fame, pushes through all opposition, and is determined that what he has discovered shall not perish for the want of a fair trial. Other persons had witnessed the effect of coal gas in producing light; but Windsor worried the town with bad English for three winters before he could attract any serious attention to his views. Many persons broke stone before Macadam, but Macadam felt the importance of the discovery more strongly, stated it more clearly, persevered in it with greater tenacity, wielded his hammer, in short, with greater force than other men, and finally succeeded in bringing his plan into general use."

When Civiale brought before the profession of Paris his admirable surgical operation, called lithotritry, the critics attempted to write him down, and denied that the process of breaking down stone in the bladder was a new invention. After having proved that he was not the inventor of his instruments, they attempted to show that the instruments themselves were detestable, and further, that Civiale did not know how to use them. Civiale, however, was happy in his associations. The eminent Chaussier and Percy concluded their report upon the subject of Lithotritry, to the Academy of Science, in these words: "Lithotritry is glorious for French surgery, honourable to its inventor, and consoling to humanity;" and a writer, in reply to these critics, who would deprive Civiale of the merit of originality, says: "In effect, the only true proprietor of a surgical improvement is he who applies it successfully, all theoretical reasonings and the cavillings of chronologists to the contrary notwithstanding."

Whether Dr. Sims bases his claims for distinction upon his indomitable perseverance under repeated failures and disappointments, ill health, and other impediments, in endeavouring to establish the curability of vesico-vaginal fistula, or merely upon the introduction of the silver suture, as embracing the whole merit, he is clearly entitled to it, and these just acknowledgments no more detract from the merit of those who have made valuable improvements than those improvements detract from the merits of the original inventor.

I have made these few remarks in justice to the profession, rather than from any partiality from any individual member. Whatever an individual member may do that redounds to his honour, sheds a proportionate lustre upon the whole profession, and nothing detracts from it so much as our own bickerings and injustice to each other.—*New Orleans Med. and Surg. Journ.*, Sept. 1859.

*Inversion of the Uterus successfully reduced on the sixteenth day after the Accident.*—Dr. GEORGE MENDENHALL publishes (*Cincinnati Lancet and Observer*, July, 1859) an interesting case of this. The subject of it was twenty-four years of age, in good health, and the present her second accouchement. The period at which the inversion took place, or the cause of it, is not very apparent from the history. Dr. M. was not called until the sixteenth day after the accident, when he found the patient in bed, in a comfortable condition, free from pain or other special inconvenience. By examination a complete inversion was readily made out; the uterus occupied the entire vagina, and completely filled the concavity of the sacrum.

Dr. M. proceeded to reduce the organ in the following manner: The patient was laid on her back, and placed under the anæsthetic influence of a mixture of

sulphuric ether and chloroform. "The right hand was introduced, without very great difficulty, into the vagina, the body of the uterus grasped and carried upwards in a line corresponding with the axis of the pelvis, and steady pressure made in that direction, so as to put the vagina and utero-vaginal connection on the stretch. The left hand was placed on the abdomen, and the fingers against the outer edges of that portion of the uterus looking towards the cavity of the abdomen (which could be distinguished plainly), and counter-pressure was made for the double purpose of preventing injury to the utero-vaginal connections, and also for the purpose of facilitating the turning of the os and neck of the uterus over the body and fundus. I am quite certain that this manipulation increased the facility of reduction, and added to the safety of the structures involved. The cramped position of the hand was occasionally relieved by passing a large rectum bougie, which was retained against the fundus by the hand in the vagina, and thus keeping up the pressure constantly.

"The turn of the uterus commenced at the neck, and was continued along the body until it involved the fundus. While this turning was in progress, the os could be felt enveloping successive portions of the body, until the fundus was also embraced by it. As soon as this portion was well above the os, the bougie was relied upon entirely for the completion of the reduction; the latter part of which took place rapidly with the point of the bougie at the fundus, and which was enveloped by the uterus in its natural cavity, when the reduction was complete. The fundus of the uterus (inclosing the bougie) could be felt very plainly above the pubes, while the lips and neck could easily be distinguished in the vagina, by passing the fingers alongside the bougie. This instrument was left in the uterus, and an injection of fifty drops of laudanum in two ounces of starch water, administered by the rectum, as soon as the effects of the anæsthetic passed off; which was in a very short time. She said she felt quite comfortable, and had not experienced much pain in the operation; her pulse and breathing were good, and no stimulant was required. The amount of blood lost was small, although the discharge was somewhat increased."

This case, with those related by Prof. White (*American Journ. Med. Sci.*, July, 1858, p. 13), and Dr. W. T. Smith (*Ibid.*, p. 270), afford encouragement to attempt replacement in cases of inverted uterus, even after a lapse of time which has hitherto been supposed to forbid any hope of relief.

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*Bibron's Antidote.*—Dr. D. O. C. HEERY relates (*Atlanta Med. and Surg. Journ.*, Aug. 1859) the following case of rattlesnake bite in which he employed Bibron's Antidote with success:—

"In travelling through Southwest Georgia, in April last, I happened at the house of Col. B. Shortly after my arrival, he informed me that one of his most valuable negroes had just been bitten by a large rattlesnake (*crotallus confluentus*) while returning from the field. The negro was bitten on the ankle of the left leg. The snake inflicted a very deep wound, and within five minutes after the bite, before much pain or swelling had ensued, I administered one dose of Bibron's Antidote, in two tablespoonfuls of brandy, and the symptoms almost immediately disappeared. One hour after the bite, pain and swelling returned, attended with considerable throbbing. I repeated the antidote, and in less than fifteen minutes the ankle had regained its natural appearance—all pain and swelling having vanished. Before returning, I repeated the dose a third time. In the morning he was perfectly well, and resumed his duties in the field."

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*Veratrum Viride in Chorea and other Convulsive Diseases.*—Dr. P. D. BAKER, of Eufaula, Ala., asserts (*Southern Med. and Surg. Journ.*, Sept. 1859) that the *veratrum viride* is as valuable a nervine as an antiphlogistic, and that in the treatment of certain neuroses it is unrivalled. He states that he has administered it in numerous cases of eclampsia in children with such success as to convince him of the power of this agent in arresting convulsions; indeed he believes that it is impossible for convulsions to continue after the system has been fully impressed by the remedy. He has also used it in puerperal convulsions and chorea with benefit. In short, he places more reliance upon the *veratrum viride* in all convulsive affections than upon any other agent of the materia medica.